

# Standard chemotherapy provides higher survival rate than experimental in lung cancer patients

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Treatment with pemetrexed, carboplatin and bevacizumab followed by maintenance pemetrexed and bevacizumab (Pem+Cb+B) is no better than standard therapy with paclitaxel, carboplatin and bevacizumab followed by bevacizumab (Pac+Cb+B) in patients with advanced non-squamous non-small cell lung cancer (NS-NSCLC), according to research presented at the 2012 Chicago Multidisciplinary Symposium in Thoracic Oncology. This symposium is sponsored by the American Society of Clinical Oncology (ASCO), the American Society for Radiation Oncology (ASTRO), the International Association for the Study of Lung Cancer (IASLC) and The University of Chicago.

According to the [American Cancer Society](#), lung cancer is the number one cause of cancer deaths in men and women each year. The current standard treatment for advanced NS-NSCLC patients, the most common form of advanced NSCLC, is either Pac+Cb+B or pemetrexed plus cisplatin. This trial sought to define a new standard of care by comparing Pac+Cb+B to the experimental [chemotherapy regimen](#) Pem+Cb+B to determine if either improved overall survival for late-stage [lung cancer patients](#). Pemetrexed plus cisplatin was not tested in this trial.

The 939 patients were randomized to receive one of the two treatment arms every three weeks for up to four cycles. The patients received the same arm for each cycle. Overall survival was not statistically different between the two arms, 12.6 months in Pem+Cb+ Bev versus 13.4

months for the Pac+Cb+B arm, The experimental arm of Pem+Cb+Bev led to a increase in time before progression of disease (PFS) compared with the standard arm of Pac+ Cb+Bev—6 months versus 5.6 months, respectively.

"The fact that there was no improvement in survival with the experimental regimen was disappointing, but these findings are important as we continue to navigate ways to improve survival for this devastating disease," said Jyoti Patel, MD, lead author of the study and an associate professor in Medicine-Hematology/Oncology at Northwestern University in Chicago. "It is important to note that both regimens demonstrated tolerability, although their toxicities differed. These differences can be important for our patients."

Provided by American Society for Radiation Oncology

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